

The Louisiana Behavioral Health Partnership

Transforming the lives of our youth

Supporting adults in need

Keeping families together



What is the Louisiana Behavioral Health Partnership?

- The umbrella behavioral health managed care program:
 - Coordinated System of Care (CSoC)
 - Other Children's Behavioral Health program (Non-CSoC)
 - Adult's Behavioral Health program
- Initially started as CSOC, focusing on children with behavioral health challenges and multi-department involvement who were in/at-risk of placement
- Broadened to include:
 - Other (non-CSoC) children's mental health services
 - Addiction services for children and adults
 - Adult mental health services

Our Goals

- **Through better coordination of services, the Louisiana Behavioral Health Partnership will:**
 - Enhance the consumer experience;
 - Increase access to a more complete and effective array of behavioral health services and supports;
 - Improve quality of care and outcomes; and
 - Reduce repeat ER visits, hospitalizations, out-of-home placements and institutionalizations.

How will we get there?

- Administrative Integration
- Service Delivery Redesign
- Resource Maximization
- Partnership with providers, advocacy groups and families.

Each of these contributes to the goal of enhanced access to an improved quality of services, while also ensuring the efficient and effective use of state resources

How is LBHP organized?

- DHH has the lead role
- The DHH Bureau of Health Services Financing (BHSF) delegated responsibility to the Office of Behavioral Health for procuring, contracting and managing a state management organization.
- The CSoC is managed by a Governance Board which includes:
 - The Governor's Office
 - Family members
 - Advocates
 - Department of Children & Family Services
 - Department of Education
 - Department of Health & Hospitals
 - Office of Juvenile Justice

How does it fit with the Coordinated System of Care (CSoC)

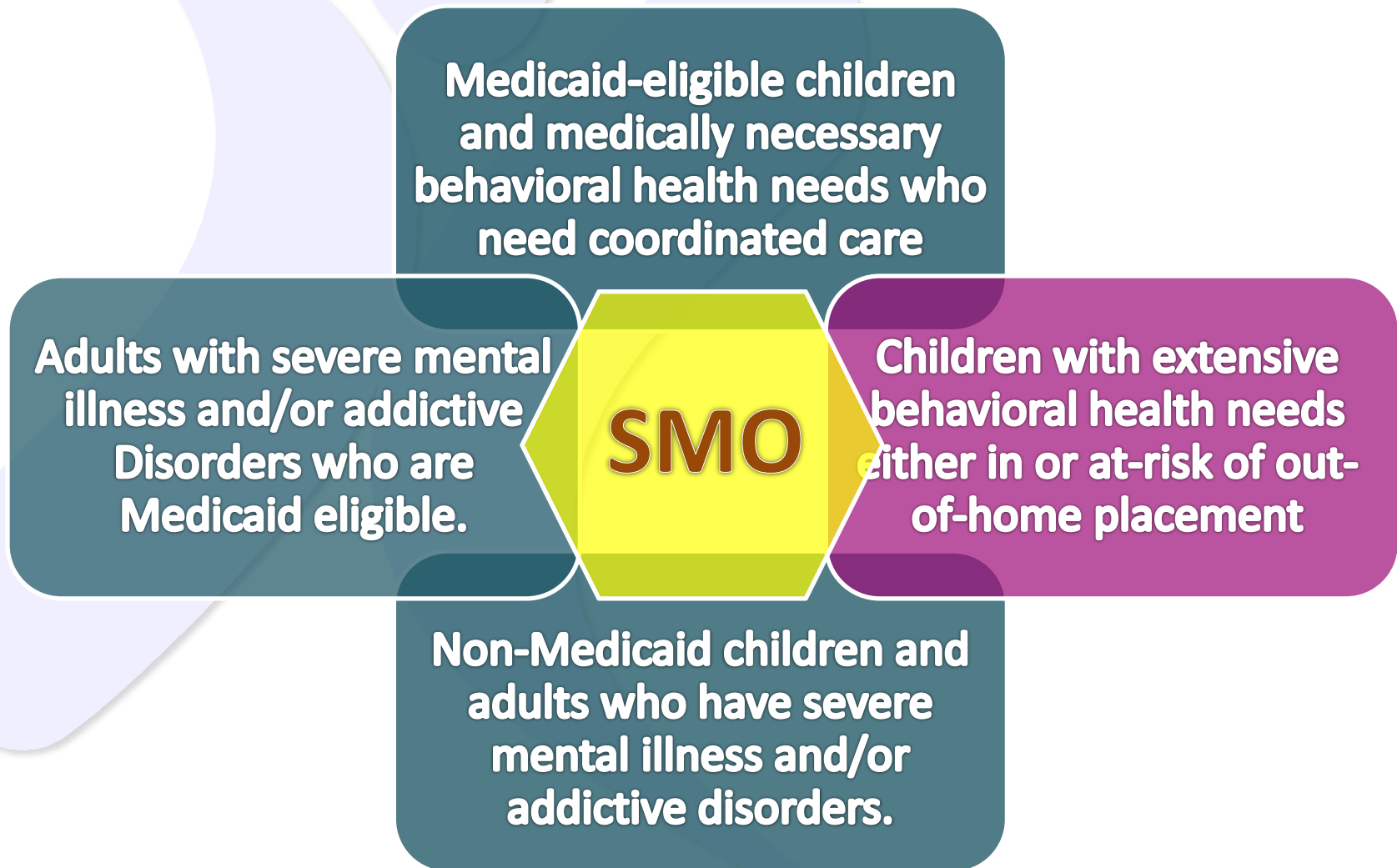
- Louisiana's CSOC is a multi-agency effort that brings together the Office of Juvenile Justice, the Department of Children and Family Services, the Department of Health and Hospitals and the Department of Education to serve children and youth that have significant behavioral health challenges or co-occurring disorders that are in or at imminent risk of out of home placement.
- CSOC is one population of focus for the Louisiana Behavioral Health Partnership.

Who will the LBHP reach?

At full implementation, we expect to be able to improve services for:

- About 2,500 of our youth who are at greatest risk and have the most complex needs (CSoC).
- About another 50,000 children and teens with behavioral health challenges.
- About 100,000 adults with serious mental illness, major mental disorder, acute stabilization needs and/or addictive disorders.

Our Populations of Focus



Youth in or at-risk of placement (CSoC)

- Services are provided through two new waivers, 1915 (b) and 1915 (c), and amended state plan services.
- It increases financial eligibility for children who are not currently Medicaid eligible.
- CSoC will provide services for an annualized estimated 2,500 children/youth, phasing in ready communities beginning early in 2012.
- Services will be paid on a “fee-for-services” basis by the SMO.
- Services are provided to all eligible children regardless of insurance coverage.

How are services accessed?

- Initial referral will be made to the SMO.
- The SMO will determine eligibility and refer to the Wraparound Agency (WAA) in the region for further assessment and planning.
- The SMO will look for gaps in care and barriers to recovery and authorize needed services.

What services are available?

- Services allowable within the scope of practice and professional license of Licensed Mental Health Practitioners*
- Community Psychiatric Support & Treatment*
- Psychosocial Rehabilitation*
- Evidence-based practices: MST, FFT, Homebuilders*
- Rehabilitation (addiction)*
- 1915(b)(3) case conference*
- Psychiatrists (physician)
- Crisis Intervention
- Rehabilitation therapeutic group home
- Psychiatric residential treatment facility (PRTF)
- Inpatient general hospital
- Psychiatric hospital

What services are included in the 1915(b) Waiver?

- Treatment (wraparound) planning with child and family teams (administrative costs not service costs)
- Cost effective service alternatives to State Plan Services (known as “in lieu of” services) and additional services paid for with State savings (known as “(b)(3)” services).
 - Use of research-based service alternatives to inpatient and psychiatric residential treatment (“in lieu of”)
 - Services not in state plan paid for by savings (“(b)(3)”)

What services are included in the 1915(c) Waiver?

- Designed by the Centers for Medicare and Medicaid Services (CMS) as a nursing facility/hospitalization diversion program for children with serious emotional disturbance
- Provides five services not available to other Medicaid youth:
 - Independent living/skill building
 - Short-term respite
 - Youth support and training
 - Parent support and training
 - Crisis stabilization

All Medicaid Eligible Children/Youth

- Provides for all medically necessary behavioral health services for all children and youth.
- Services are provided through amended state plan services which increases the array of services and expands professionals who can bill for services.
- Eligibility does not change.
- Services paid on a “fee-for-services” basis by SMO.
- Begins statewide once CMS has approved amendments and SMO is in place.

How are services accessed?

- Services are accessed directly through a participating provider or through a referral from the SMO.
- Services will be authorized once determined to be medically necessary by the SMO.

What services are available?

- Services allowable within the scope of practice and professional license of Licensed Mental Health Practitioners*
- Community Psychiatric Support & Treatment*
- Psychosocial Rehabilitation*
- Evidence-based practices: MST, FFT, Homebuilders*
- Rehabilitation (addiction)*
- 1915(b)(3) case conference*
- Psychiatrists (physician)
- Community Based Services (ACT, ICM, etc.)
- Crisis Intervention
- Rehabilitation therapeutic group home
- Psychiatric residential treatment facility (PRTF)
- Inpatient general hospital
- Psychiatric hospital

All Medicaid Eligible Adults

- Provides for behavioral health services for all adults who have severe and persistent mental illness and/or addictive disorders including co-occurring disorders.
- Services are provided through amended state plan services.
- Eligibility does not change.
- Services paid on a “per-member-per-month” basis by SMO – SMO is at risk for costs.
- Begins statewide once CMS has approved amendments and SMO is in place.

How are services accessed?

- Services are accessed directly through a participating provider or through a referral from the SMO.
- Services will be authorized once determined to meet eligibility criteria and necessity by the SMO.

What services are available?

- Services allowable within the scope of practice and professional license of Licensed Mental Health Practitioners*
- Psychiatrists (physician)
- Community Psychiatric Support & Treatment*
- Psychosocial Rehabilitation*
- Crisis Intervention
- Rehabilitation (addictions)
- Inpatient general hospital
- Psychiatric hospital (over 65)
- 1915(b)(3) case conference

Non-Medicaid Adults and Children

- Provides for behavioral health services for Non-Medicaid children and adults with SMI and/or addictive disorders.
- Services are provided through state funded behavioral health clinics or residential services.
- Clinical eligibility does not change.
- Prior authorization & treatment planning rests with SMO with services delivered through state clinics and existing contracted providers.
- Begins statewide once SMO is in place.

How are services accessed?

- Services are accessed directly through a State provider or through a referral from the SMO.
- Services will be authorized once determined to meet eligibility criteria and necessity by the SMO.

What services are available?

- Services allowable within the scope of practice and professional license of Licensed Mental Health Practitioners
- School-Based Behavioral Health Services
- Psychiatrists (physician)
- Psychiatric Rehabilitation
- Rehabilitation (substance abuse)
- Rehabilitation therapeutic group home
- Psychiatric residential treatment facility (PRTF)
- Inpatient acute psychiatric hospital
- Psychiatric hospital

How will we do this?

- DHH will issue an RFP and award a contract for a State Management Organization (SMO).
- The SMO will assist with the State's system reform goals to:
 - Foster individual, youth, and family-driven behavioral health services that are evidence-based.
 - Increase access to a fuller array of evidence-based and promising home- and community-based services that promote hope, recovery, and resilience.
 - Improve quality by establishing and measuring outcomes.
 - Manage costs through effective utilization of State, federal, and local resources.
 - Foster reliance on natural supports that sustain individuals and families in homes and communities.

Why manage care?

- Managed care provides valuable tools for all populations:
 - 24 hour access to member services via a toll-free #
 - Care coordination/utilization management
 - Quality management & outcomes monitoring
 - Protections for members and providers (grievance/appeal process, credentialing of qualified providers, member input, fraud/abuse detection)
 - Improved reporting and monitoring

Why manage care?

- Medicaid is a complex insurance program
 - Federal rules require close attention to member access and other protections, quality of care and efficiency
 - Expansion of benefits (as is proposed) requires:
 - Development of sustainable plans of care that foster resilience and promote recovery
 - Information technology to track and manage care for multiple “benefit packages”
- Helps to ensure services are matched to need and costs are contained

What will the SMO do?

- Provide oversight and management of services provided under CSoC.
- Improve access, quality, and efficiency of behavioral health services for children not eligible for the CSoC, and adults with Serious Mental Illness and Addictive Disorders.
- Support the identification of new services that need to be developed to achieve outcomes.

SMO Scope Of Services

- 24/7 Call Center Operation
- Member Services
- Preauthorization and level of care determinations
- Care Management including treatment planning/ discharge planning and Care Coordination
- Utilization Management
- Quality Management
- Grievances and appeals
- Complaints resolutions
- Members rights and Protections
- Reporting and Monitoring
- Implementation Planning
- Administrative Organization
- Transition Planning should the contract end
- Fraud and Abuse Detection
- Technical Requirements
- Cultural Competence
- Network Development and Gap Analysis

The Provider Network

A key component of the responsibilities for the SMO is to develop a qualified provider network which offers a full array of services to meet the needs of people with behavioral health challenges.

Providers play a significant and critical role in the Louisiana Behavioral Health Partnership.

Who are our providers?

An LMHP includes individuals licensed to practice independently:

- Psychiatrists
- Medical Psychologists
- Licensed Psychologists
- Certified School Psychologists
- Licensed Clinical Social Workers (LCSWs)
- Licensed Professional Counselors (LPCs)
- Licensed Marriage and Family Therapists (LMFTs)
- Licensed Addiction Counselors (LACs)
- Advanced Practice Registered Nurses

Who are our providers?

- Existing Behavioral Health Clinics (AD&MH licensed clinics)
- Mental Health Rehab (MHR) provider agencies
- Hospitals
- Residential (such as Psychiatric Residential Treatment Facility-RTF, Therapeutic Group Home)

What will providers need to do?

Credentialing and Certification

- Credentialing is a process by which professionals provide evidence that they are qualified to perform designated clinical activities.
- Certification and credentialing are designed to ensure that health professionals in all roles are qualified, capable, and prepared to perform the services for which they are employed or given permission to provide.

What will providers need to do?

- Accreditation
 - Joint Commission on Accreditation of Health Care Organizations
 - Council on Accreditation of Rehabilitation Facilities
 - Council on Accreditation
 - *Council on Accreditation for Children and Family Services. (Additional accreditation option available for facilities participating in the Medicaid Residential Treatment Option)

Accreditation is required within 18 months.

What are the qualifications?

- An LMHP must be a licensed independent practitioner and certified by OBH to provide specific services.
- Non-licensed staff (Masters and Bachelors level), family and peer support staff will also be required to meet certification standards specific to their provider role.
- Credentialing process for provider enrollment (agencies and practitioners) will also include criminal, abuse/neglect registry and professional background checks, and may require completion of a state approved standardized basic training program.

How will we support providers?

- **OBH** will communicate information to providers on progress of LBHP implementation and actions necessary for provider participation
- **OBH** will provide access to training
- **OBH** will provide specifics on certification process for LMHPs and agencies
- **SMO** will credential and enroll providers into the Network
- **SMO** will provide training on authorization for services, reimbursement rates and methodology, claims processing, quality assurance participation.

How will we support providers?

- Planned Workforce Development Activities include:
 - Matching services with provider competencies
 - Identification and provision of training;
 - Wraparound process
 - Assessment processes (such as Child and Adolescent Needs Strengths Assessment (CANS)
 - Cultural and Linguistic Competence
 - Evidence Based Practices (such as MST, FFT, ACT, etc.)
 - Pre-service competencies
 - Credentialing and Certification of provider network (LMHP practitioners and provider agencies)

How will we ensure quality?

- A Quality Management Strategy (QMS) is a federal requirement for programs receiving Medicaid funds.
- The goals of the QMS include insuring that:
 - eligible Louisiana citizens have access to Medicaid funded managed care programs
 - the programs have competent staff and an adequate network to deliver services
 - outcomes meet SMO, Medicaid, and State standards

How will we ensure quality?

- Quality Management Plan

The LABHP comprehensive quality management plan involves several committees and agencies with integrated responsibilities and functions to insure that the citizens of Louisiana receive the best possible care in a cost-efficient manner.

How will we ensure quality?

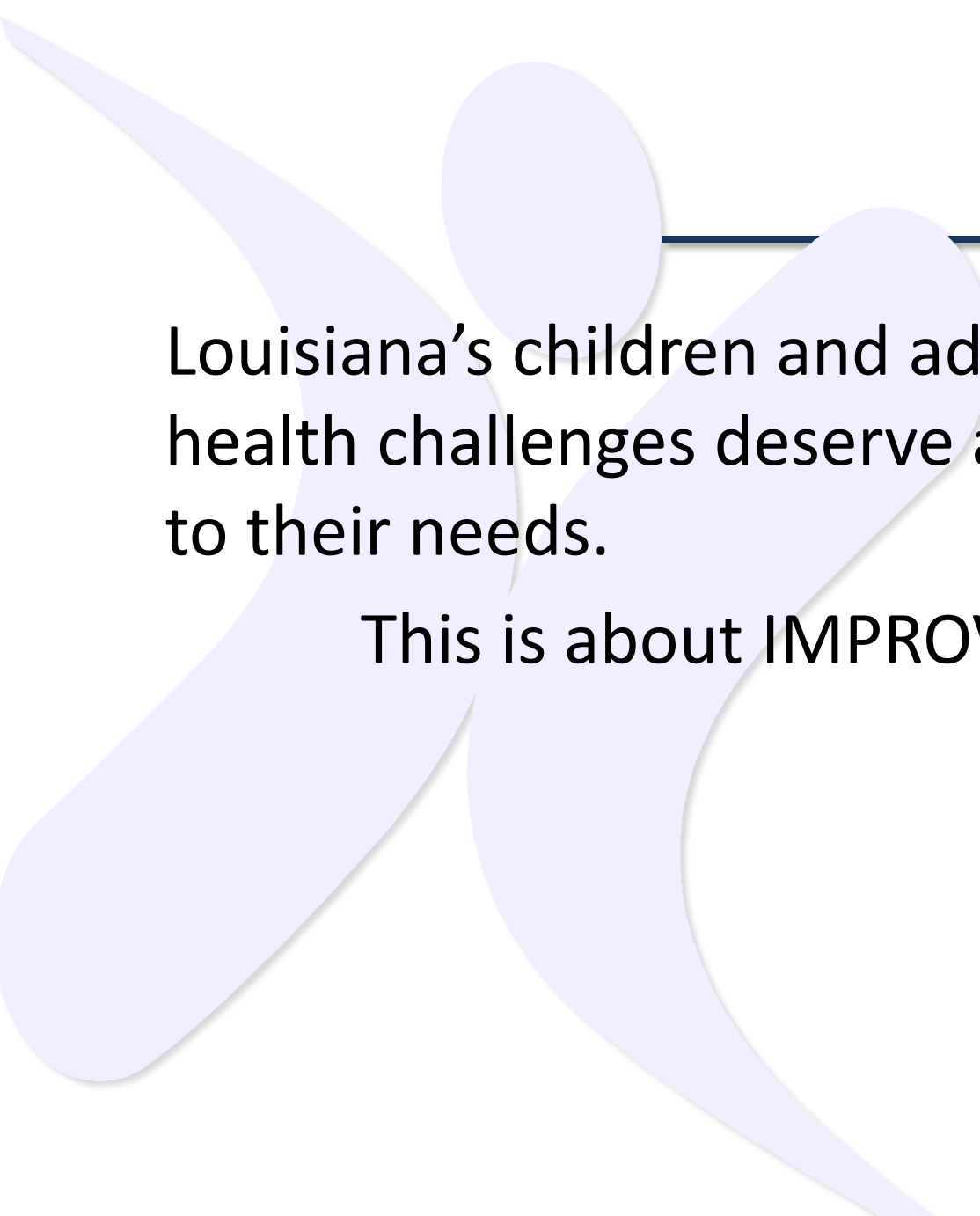
- OBH reviews and analyzes SMO practices and client outcomes.
- The Intra-Departmental Monitoring Team assesses performance measures and clinical outcomes. Members come from “agency partners” in CSoC.
- The External Quality Review Committee performs an annual independent review of SMO & OBH and compliance with Medicaid regulations
- The SMO has an Internal Quality Management Plan and a Clinical Assessment Team that assesses services and outcomes.
- Medicaid assesses compliance with federal law.

How are we paying for this?

- Leveraging unmatched funds
- Leveraging of addiction dollars
- Use of the SMO and other efficiencies will generate savings, both true and for reinvestment in the system.

What is our timeline?

- Award Phase I CSoC (Wraparound Agencies (WAA) & Family Support (FSO)) regions – 6 /13/11
- Begin WAA/FSO implementation technical assistance – week of 6/20/11
- Conduct LBHP forums across the state – by 6/30/11
- Issue SMO RFP – week of 7/5/11
- Award SMO RFP – week of 9/5/11
- SMO implementation activities (including provider training, enrollment, etc.) begin – week of 9/11/11
- State Plan Amendments & Waivers approved by CMS – target October 2011
- Begin eligibility determinations for Waivers – January 2012
- Full implementation as soon as SMO is operational

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Louisiana's children and adults with behavioral health challenges deserve a system responsive to their needs.

This is about IMPROVING LIVES.